# **QUARTERLY SERVICES SURVEY**

### **Due Date**

#### Need help or have questions?

**Call** 1-800-772-7851 (8:30 a.m. - 5:00 p.m. ET, M-F)

https://www.census.gov/services/qss/respondent-information.html

Title 13 United States Code (U.S.C.), Sections 131 and 182, authorizes the Census Bureau to conduct this collection. The U.S. Census Bureau is required by Section 9 of the same law to keep your information confidential and can use your responses only to produce statistics. The Census Bureau is not permitted to publicly release your responses in a way that could identify your business, organization, or institution. Per the Federal Cybersecurity Enhancement Act of 2015, your data are protected from cybersecurity risks through screening of the systems that transmit your data. This collection has been approved by the Office of Management and Budget (OMB). The eight-digit OMB approval number is 0607-0907 and appears at the upper right of this page. Without this approval, we could not conduct this survey

(Please correct any errors in name, address, and ZIP Code.)

INTERNET REPORTING OPTION AVAILABLE. We encourage you to complete this survey online at: https://portal.census.gov

**Authentication Code:** 

To view Survey Results:

https://www.census.gov/services

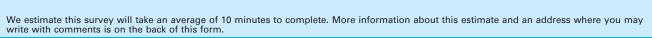
# **GENERAL INSTRUCTIONS**

- Any significant change in this firm's operations should be noted in 8
- For establishments sold or acquired during the quarter(s), report data only for the period the establishments were operated by this firm
- Estimates are acceptable if book figures are not available
- Enter "0" where applicable
- Report data on an accrual basis
- Dollars should be rounded to the nearest dollar
- If a figure is \$1,030,280,456 it should be reported as -

	Bil.	Mil.	Thou.	Dol.		
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### Include:

- Data for all Services establishments (excluding data for Retail, Wholesale, Manufacturing, Mining, and Construction operations) as defined by the survey coverage in ①
- Data for auxiliary facilities primarily engaged in supporting services to this firm's establishment(s) such as warehouses, garages, central administrative offices, and repair services





Form QSS-4A Page 2 (08-23-2022) **SURVEY COVERAGE** Did this firm provide the business activities described below? Yes Not Applicable. **ORGANIZATIONAL CHANGE** A. Did this firm experience any acquisitions, sales, mergers, divestitures, and/or cease operations in the Yes No - Go to 4 B. Which of the following organizational changes occurred in the Check all that apply. If more than one organizational change occurred during the reporting period, explain in 3. Month Day Acquisition Date of organizational change Sale AND Merger Enter detailed information below Divestiture Month Day Year Ceased Operation - Date of ceased operation/closure Name of company EIN (9 digits) Address (Number and street, P.O. Box, etc.) City, town, village, etc State ZIP Code

4	REPORT	FING PERIOD			
	What ti	me period is covered by the data provided in this report?			
				Beginni	ing Date
		Calendar quarter	Month	Day	<b>Y</b> ear
		Other - Report beginning and ending dates			
				End	Date
			Month	Day	Year

### **SALES, RECEIPTS, OR REVENUE**

Firms operating on a commission basis should report commissions, fees, and other operating revenue income, not gross billings or sales.

#### **Taxable Firms**

#### Include:

- Total value of service contracts
- Amounts received for work subcontracted to others
- Revenue from services performed by domestic locations for foreign parent firms, subsidiaries, branches, etc.
- Market value of compensation in lieu of cash
- Franchise sales, fees, and royalties
- Sale or licensing of rights to intellectual property protected by copyright or as industrial property (e.g., patents, trademarks)

#### Exclude:

- Taxes (sales, amusement, occupancy, use, or other) collected directly from customers or clients and paid directly to a local, state, or Federal tax agence
- Revenue from a domestic parent organization, or from franchise locations owned by others
- Rents from and revenue of separately operated departments, concessions, etc., which are leased to
- Revenue from customers for carrying or other credit charges
- Commissions from vending machine operators
- Revenue of foreign subsidiaries (those located outside the U.S., i.e., outside the 50 states, District of Columbia, U.S. Commonwealth Territories, or U.S. Possessions
- Nonoperating revenue such as income from investments, sales of company-owned real estate (land and building), or other assets (except inventory held for resale), securities, gifts, loans, contributions, or grants
- Revenue from the sale of used equipment
- Installment payments from leasing under capital, finance, or full-payout leases
- Intracompany transfers
- Interest income
- Gross contributions, gifts, and grants (whether or not restricted for use in operations)

### **Tax-exempt firms**

#### Include:

- Program service revenue
- · Gross sales of merchandise, minus returns and allowances
- Income from interest, dividends, gross rents (including display space rentals and share of receipts from departments operated by other companies), royalties, and other investments
- Net gains (losses) from the sale of real estate (land and buildings), investments, or other assets (except inventory held for resale)
- Gross contributions, gifts, and grants (whether or not restricted for use in operations)
- Dues and assessments from members and affiliates
- Commissions earned from the sale of merchandise owned by others (including commissions from vending machine operators)
- Gross receipts from fundraising activities

### Exclude:

- Taxes (sales, amusement, occupancy, use, or other) collected directly from customers or clients and paid directly to a local, State, or Federal tax agency
- Gross receipts of departments or concessions operated by other companies
- Amounts transferred to operating funds from capital or reserve funds

\$ Bil.	Mil.	Thou.	Dol.		

What was this firm's revenue in the



6 and 7 Not Applicable.

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Nan	ne of pe	rson to cont	act reg	arding	this report (Plea	se print)	Title	
		Area co	ode		Number	Extension	E-mail address	_
Tel	lephone							
Web	osite							

## **THANK YOU** for completing your QUARTERLY SERVICES SURVEY.

We suggest you keep a copy for your records.

We estimate this survey will take an average of 10 minutes to complete, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this voluntary collection of information, including suggestions for reducing this burden, to: sssd.qss@census.gov. Be sure to use "EID Survey Comments 0607-0907" as the subject.